

# Department of Behavioral Health Opioid Use Disorder Report

## FY2024

(October 1, 2023-Sept 30, 2024)

**One Agency. One Mission. One Voice.**



# Reporting Logic

The primary method of measuring outputs and short-term outcomes for this report is from the reporting by the District of Columbia Opioid Response (DCOR) grantees. Providers (subrecipients, contractors, etc.) submit required monthly reports that evaluate their progress, which enables DBH to discuss with them areas for improvement and resolving potential barriers to service delivery. The following agencies data are included in this report: Department of Corrections (DOC), District of Columbia Fire and Emergency Medical Services Department (FEMS), and Department of Behavioral Health (DBH). For additional opioid-related data, please visit the LIVE.LONG.DC. data dashboard at <https://livelong.dc.gov/>

# Opioid Report FY24 Overview

Suspected Non-Fatal Opioid Overdose

4,392

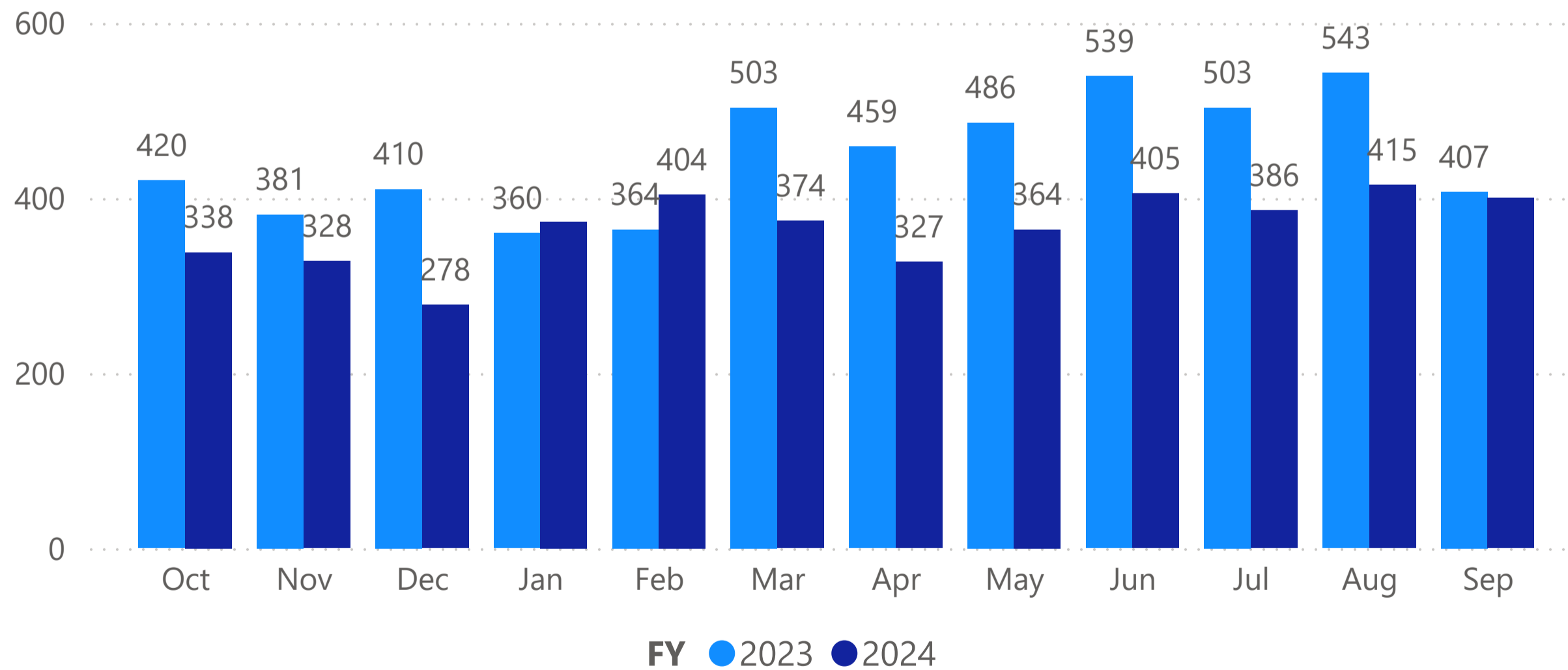
Previous Year: 5375 (-18%)

Opioid Related Deaths

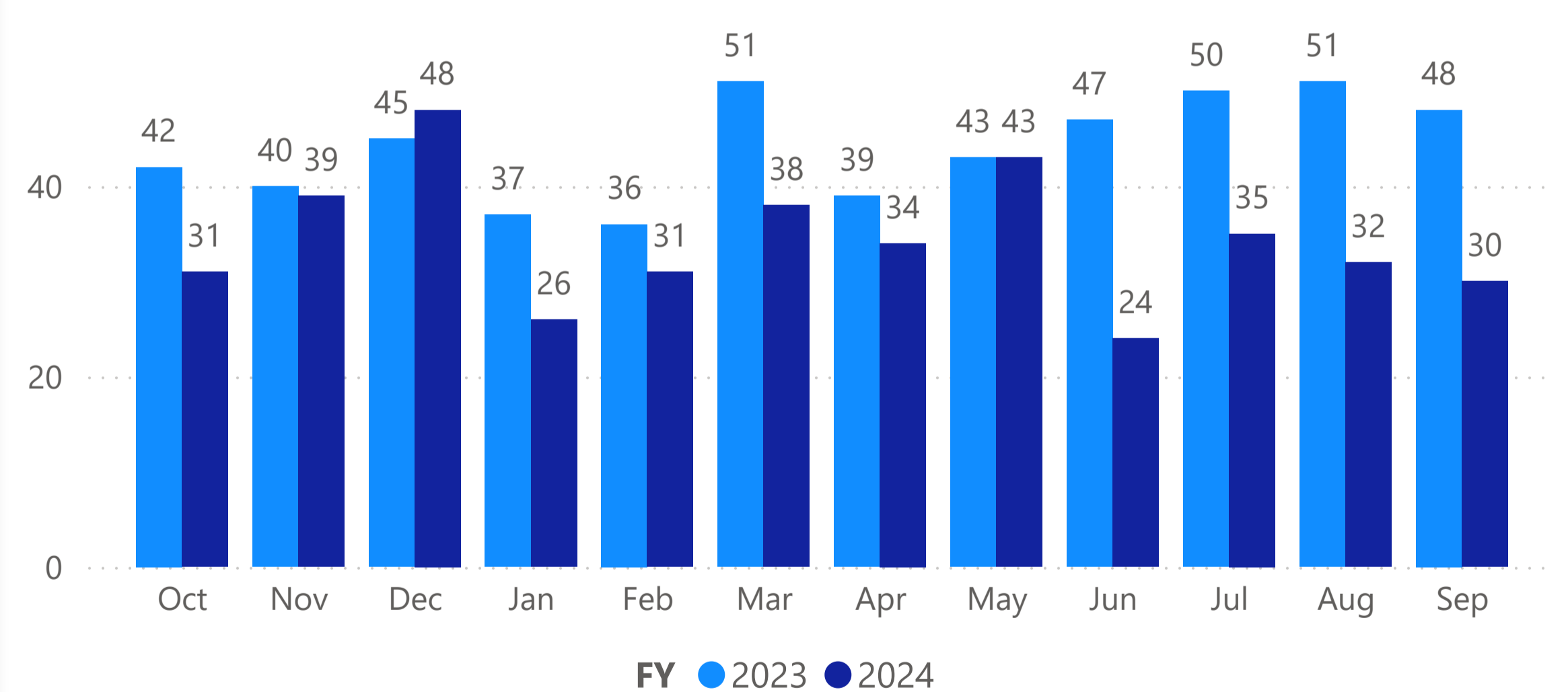
411

Previous Year: 529 (-22%)

Suspected Non-Fatal Overdose

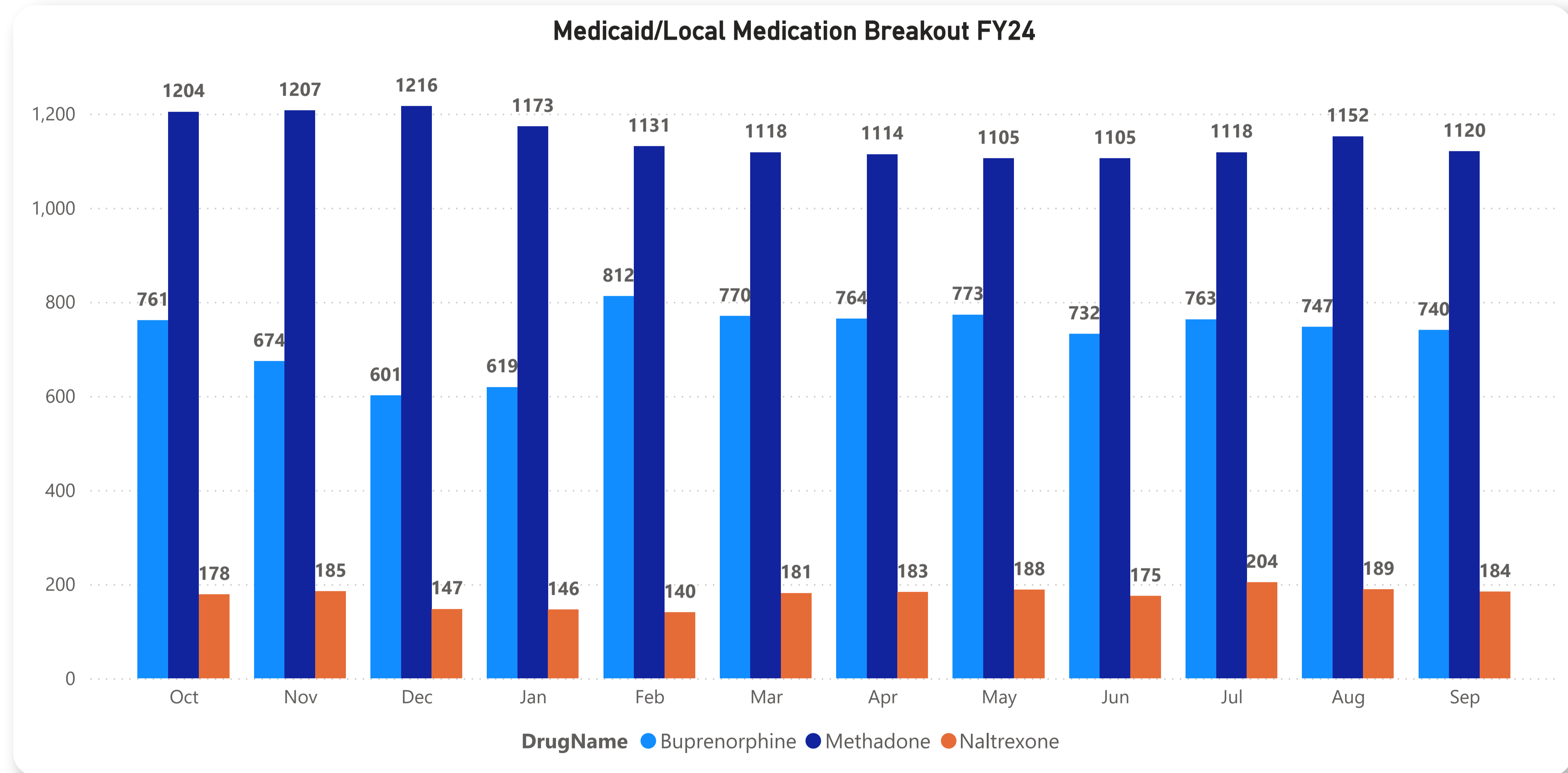


Opioid Related Deaths



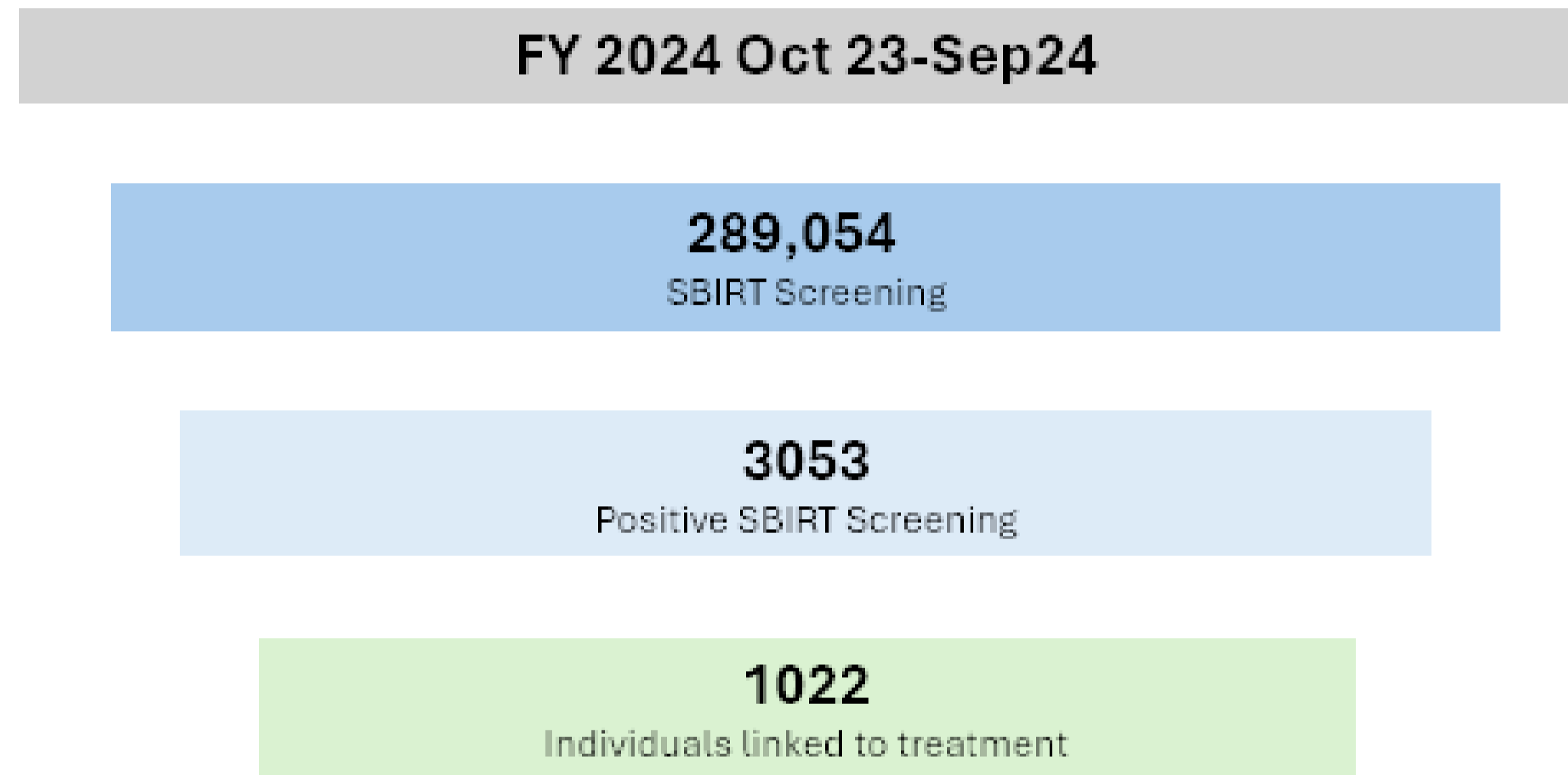
Both suspected non-fatal and fatal overdoses have decreased in FY24 when compared to the same time frame in FY23. This data for this report was pulled on June 30. For more information please visit the [DC Health Opioid Overdose Dashboard](#).

# Medication for Opioid Use Disorder (MOUD)



Buprenorphine and Naltrexone data is from Medicaid claims. Methadone data is self-reported from the Opioid Treatment Programs.

# Hospital-based Peer Program

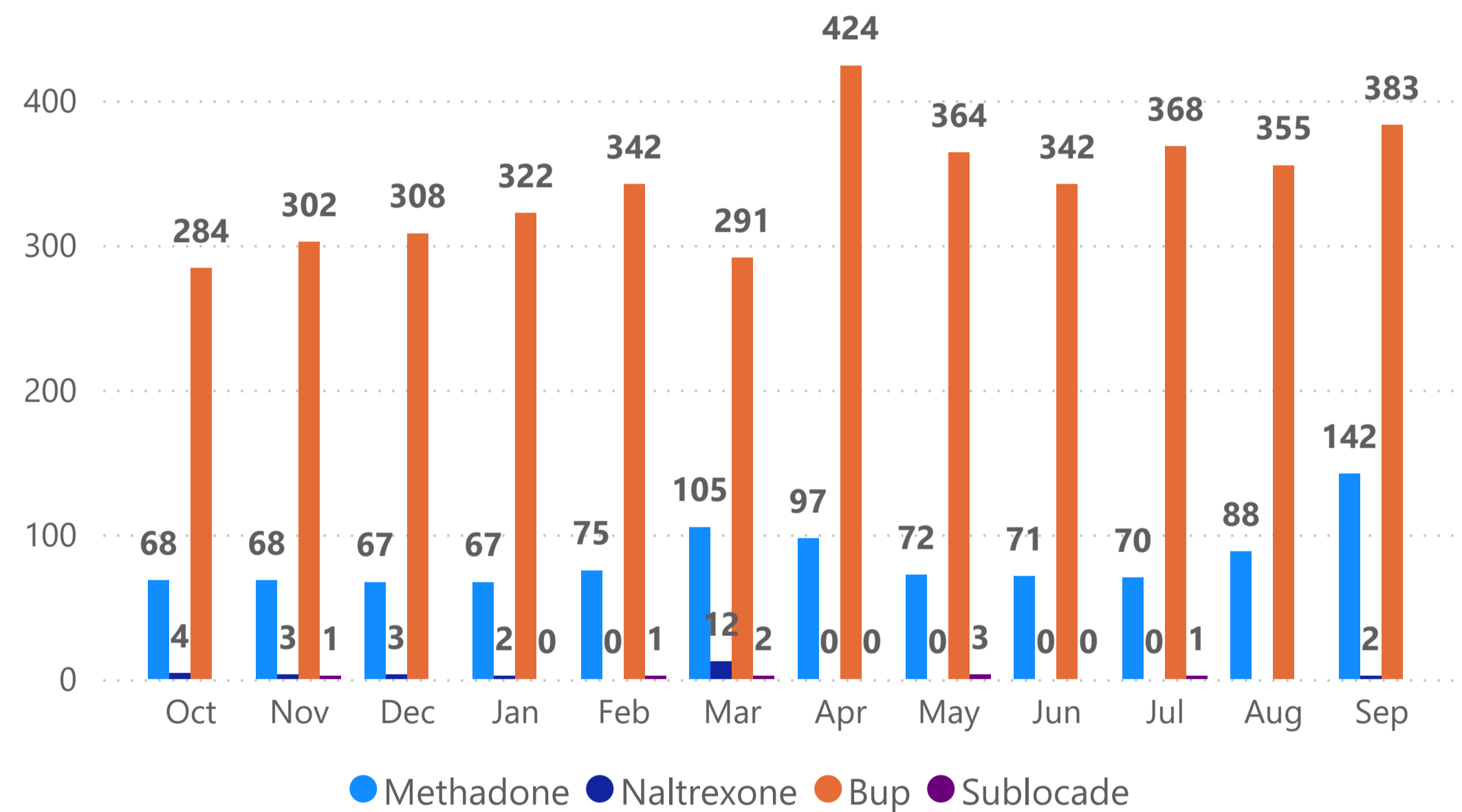


**27% decrease** from FY23 (N=1,416)

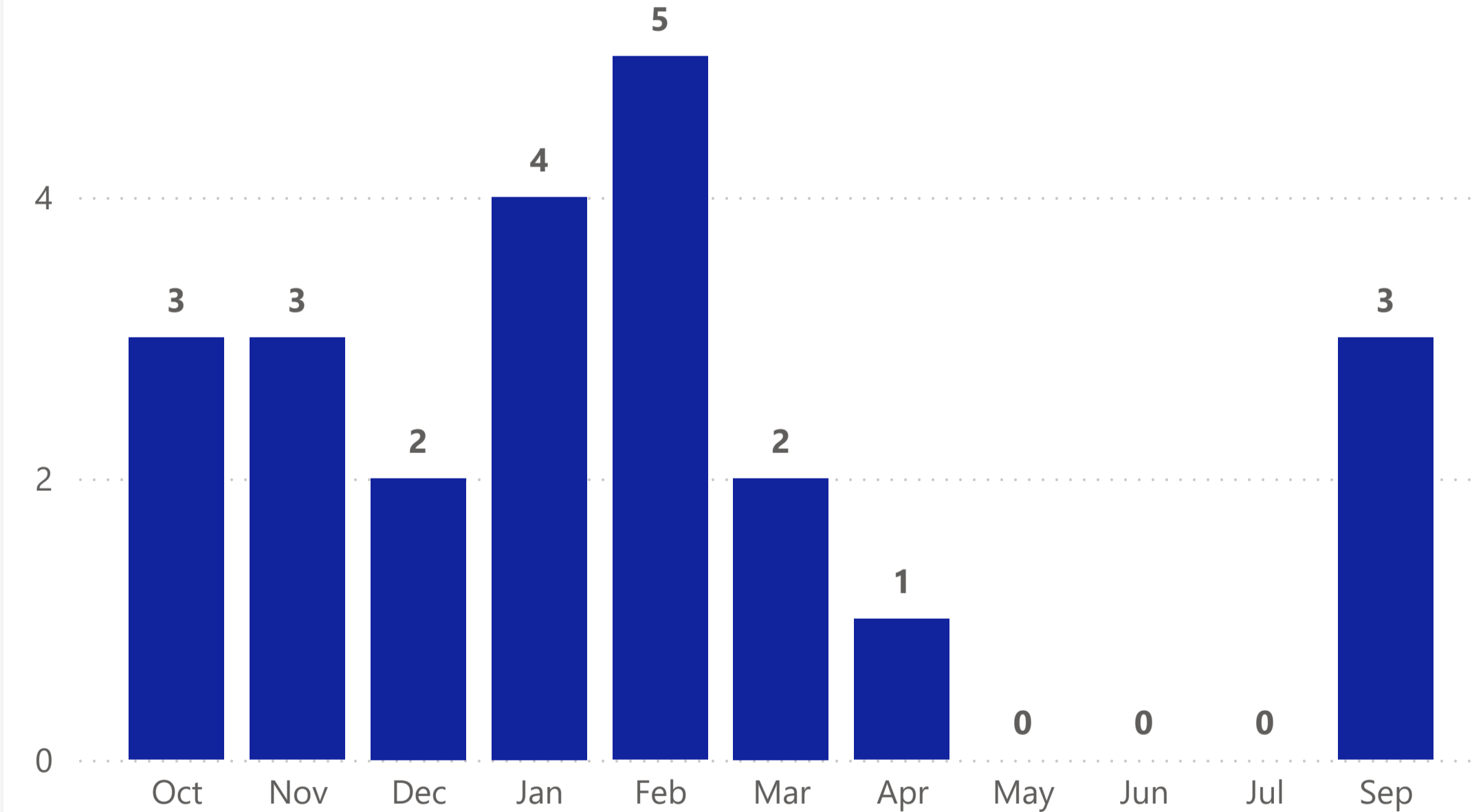
All six adult acute care hospitals screen everyone for SUD in the emergency department and employ individuals with lived experience who facilitate either MOUD induction in the hospital or linkage to treatment post-release in the community. This service extends from the emergency department to the inpatient units and out into the community post-release from the hospital. A seventh hospital that is only inpatient, participates in the initiative. Seven hospitals use a unified hospital-based peer program to provide recovery support services and connections to treatment in the hospital for patients who screen positive for OUD/STUD, and in the community for patients at high risk with a suspected overdose. Individuals linked to treatment were seen by a behavioral health provider.

# Department of Corrections

### MOUD in DC Jail



### Suspected Opioid Overdose Reversals FY24



No comparative data for FY23, metric created in FY24

There are two substance use disorder (SUD) treatment units in DC Jail: one for women and one for men. The jail provides all three forms of MOUD to individuals on the units as well as to anyone else in the jail requesting it.

# Harm Reduction

Attempted Overdose Reversals in Community

**716**

Previous Year: 729 (-1%)

Successful Overdose Reversals in Community

**682**

Previous Year: 636 (+7%)

Pharmacy Naloxone Distribution

**1,333**

Previous Year: 2882(-54%)

Naloxone Delivery-Text-to-Live

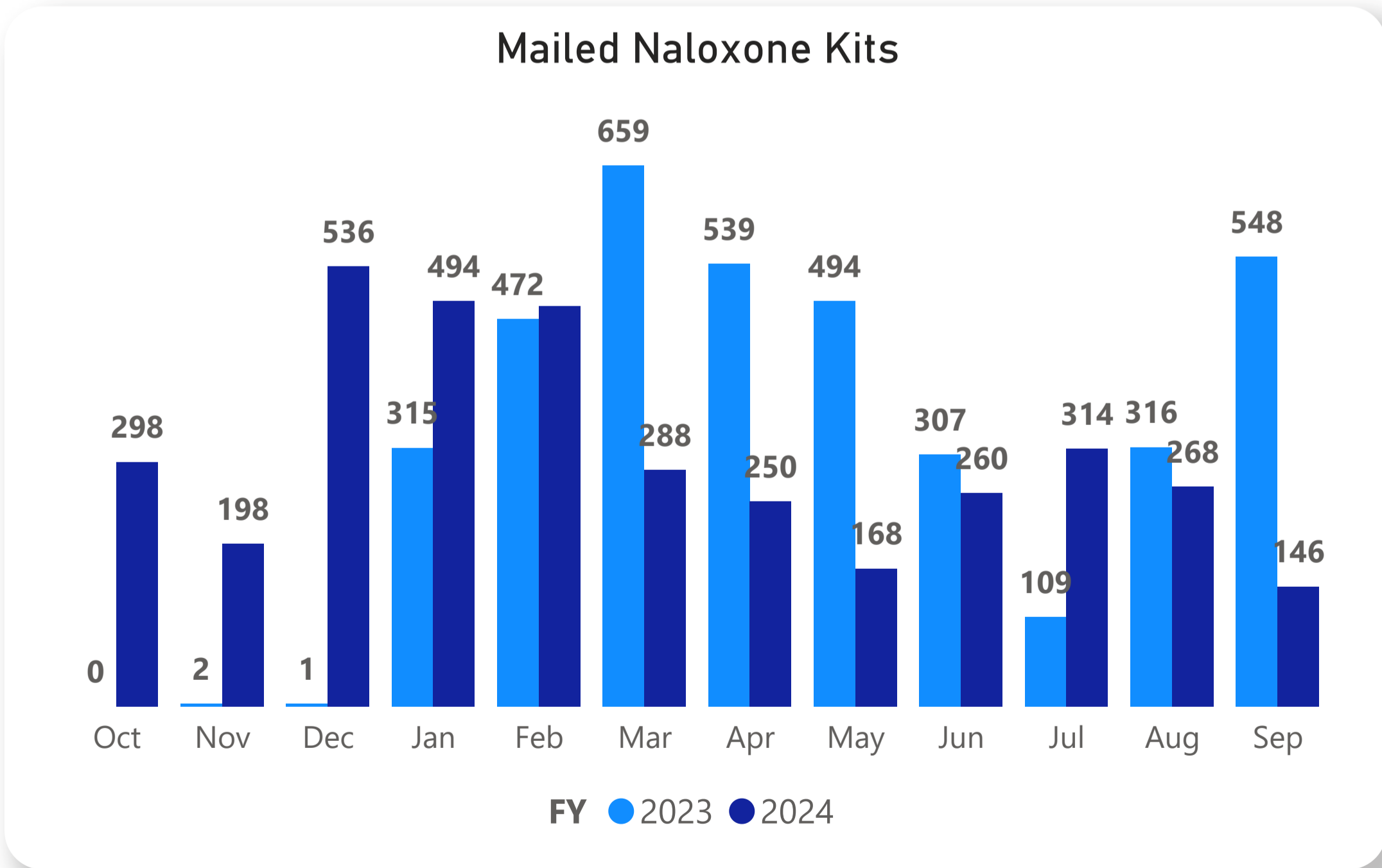
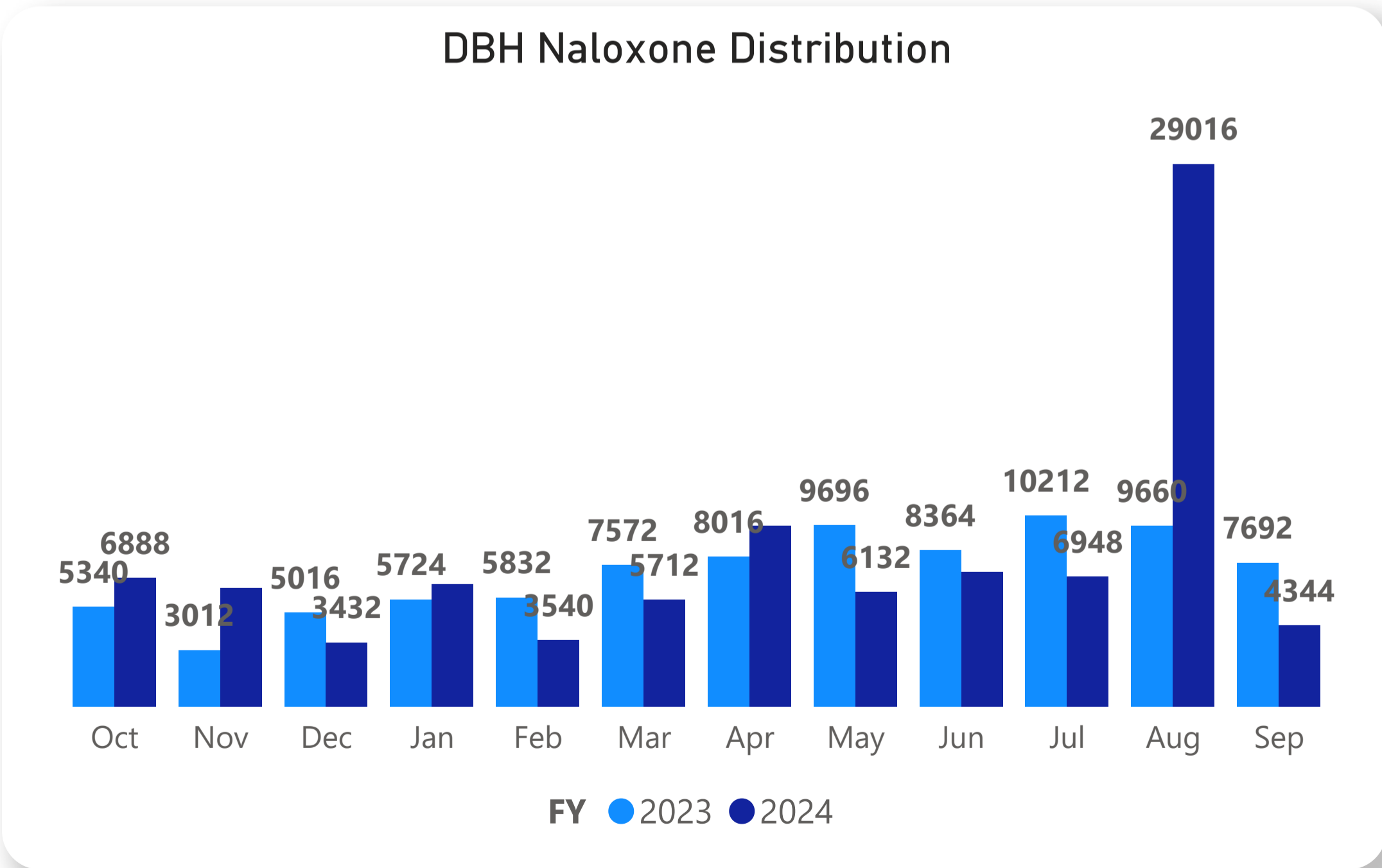
**142**

Previous Year: 367(-61%)

DBH Fentanyl Test Strips Distribution

**55,464**

Previous Year: 86,136(-35%)

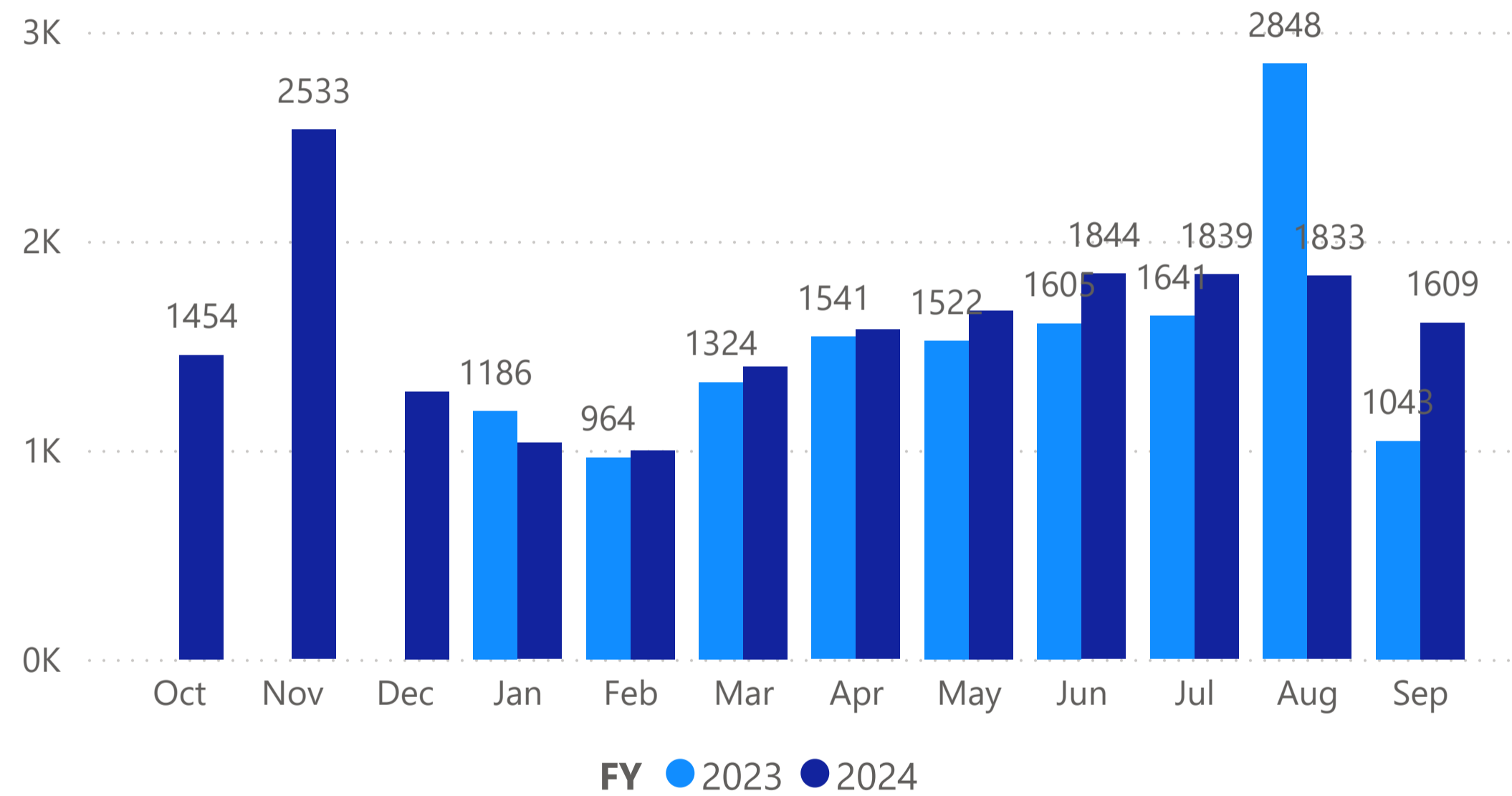


Overdose reversals and fentanyl test strip distribution has increased in FY24

\*Mailed Naloxone is a subset of DBH Naloxone

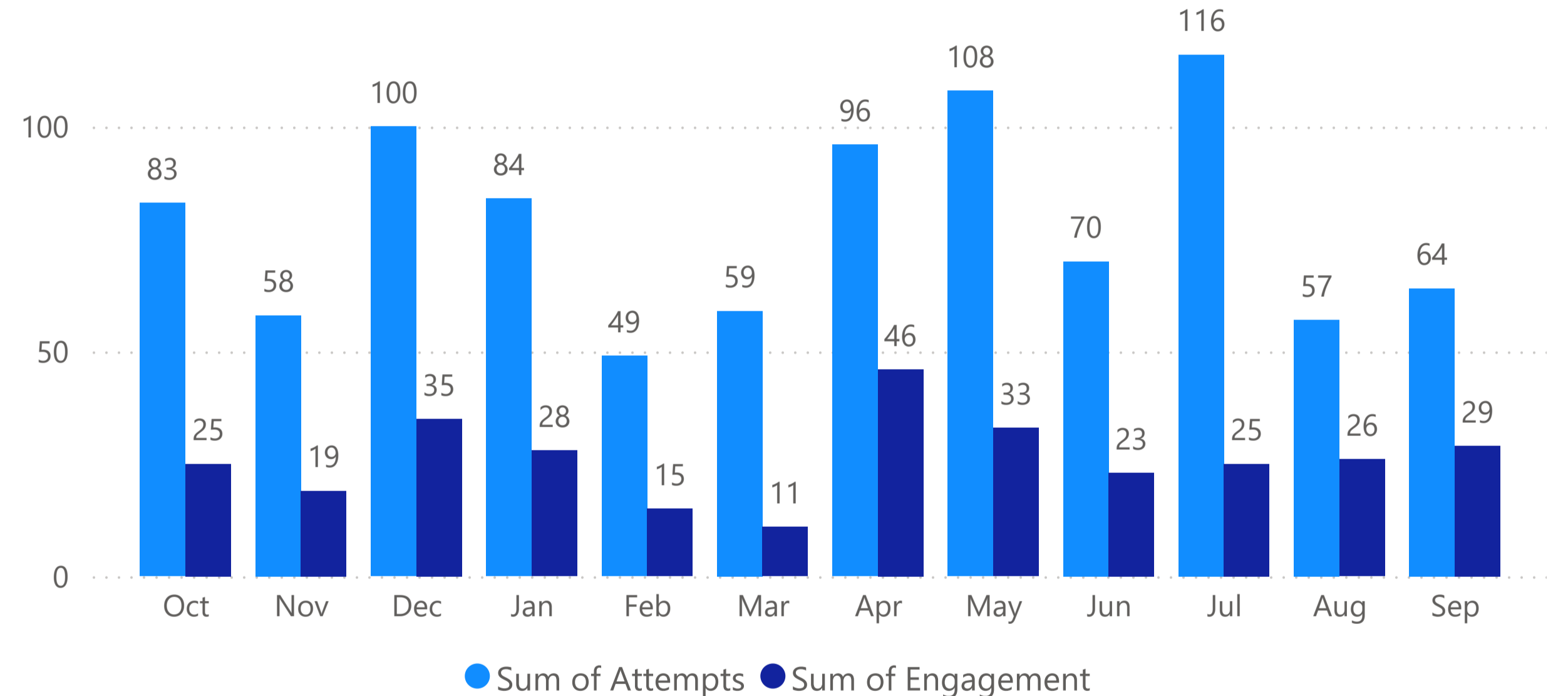
# Outreach

Syringe Service Programs (SSPs) Contacts



Duplicated over month  
Program started in Jan 2023

FEMS Outreach Attempts and Engagement FY24



Attempts = FEMS attempting to engage in outreach following non-fatal opioid overdose  
Engaged = FEMS making contact with patient following non-fatal opioid overdose

This initiative consists of syringe services, outreach efforts, and providing referrals/linkages to substance use disorders (SUD) treatment.